Combined Declaration For Patent Application and Power of Attorney						ATTORNEY DOCKET 85696KNM			
As below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
A PROCESS OF TRANSFERRING TRANSFERABLE PROTECTION OVERCOAT TO A									
DYE-DONOR ELEMENT The specification of which (check only one item below):									
X is attached hereto.									
was filed as United States Application Serial No. on and									
was amended on (if applicable). was filed as PCT international application Number on and was amended on (if applicable).									
I hereby state that I have reviewed	•					laims, as	amended by	any ame	endment
referred to above. I acknowledge the duty to disclos	e to the U.S. Pate	nt & Trademark Ofi	fice a	Il information known to m	e to be mate	rial to pa	ntentability a	s defined	in Title
37, Code of Federal Regulations,	§1.56.							_	
I hereby claim foreign priority benefits under Title 35, United States Code, §119 (a)-*d) or 365 (b) of any foreign application(s) for patent or inventor's certificate, or (365 (a) of any PCT international application(s) which designates at least one country other than the United States of America, listed below									
and have also identified below ar	ny foreign applica	tions(s) for patent o	or inv	entor's certificate or any P	CT internati	onal app	lication(s) d	esignatin	g a least
one country other than the United priority is claimed:	States of America	i filed by me on the	same	e subject matter having a f	iling date bef	fore that	of the applic	ation(s) o	of which
PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:									
COUNTRY (il PCT, indicate PCT)	AP	PLICATION NUMBER		DATE OF FILING (month/dayyear)		PRIORITY CLAIMED UNDER 35 USC §119 YES NO			§119 NO
							YES		NO
							YES		NO

I hereby claim the benefit under T					1551	(s) listed	below:		
PRIOR PROVISIONAL APPLI	PLICATION NUMBER	ANY PRIORITY	CLA	IMS UNDER 35 U.S.C.	§119 (e):				
PROVISIONAL AF	PLICATION NUMBER				FILING DATE (mg	ntfvday/year)			
I hereby claim the benefit under T the United States of America that prior applications(s) in the manne Office all information known to between the filing date of the prior	is/are listed below er provided by the me to be materia	and, insofar as the first paragraph of a to patentability as	subje Title defi	ect matter of each of the cl 35, §112, I acknowledge t ned in Title 37, Code of I	aims of this a he duty to d Federal Regu	applications of the state of th	on is not disc the U.S. Pa	closed in atent & T	that/those rademark
PRIOR US APPLICATIONS O 35USC§120:	R PCT INTERN	ATIONAL APPLIC	CATI	ONS DESIGNATING TH	E U.S FOR	BENE	IT UNDER		
. U.S. APPLICATIONS					STATUS (Check one)				
U.S. APPLICATION NUMBER		U.S. FILING DATE		PATENTI	ED	PENDING	ABA	NDONED.	
				= 44					
PC	T APPLICATIONS DE	ESIGNATING THE U.S.							
PCT APPLICATION NO. PCT FILING		IG DATE		J.S. SERIAL NUMBERS ASSIGNED (if any)					
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С	mbined Dec		ATTORNEY DOCKET 85696KNM				
P	OWER C	OF ATTORNEY: As a nan	ned inventor, I hereby appoin	t the attorney(s) and/or		
th	gent(s) as is applic erewith.	sociated with Eastman Koc ation and transact all busin	dak Company <u>Customer No</u> less in the Patent and Traden	o. 01333 to property of the contract of the co	osecute inected		
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) SE	ad Corresp	Patent Legal	Staff	Oirect Telephon			
77 1 1							
2 7004 Eastman Rodak 343 State Street				Kathleen N	euner Manne		
31				Phone: 585	Phone: 585 722-9225		
8 /		Rochester, N	Y 14650-2201	FAX: 585 477-1148			
QĄ1	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NA	AME		
	RESIDENCE &	Simpson	William STATE OR FOREIGN COUNTRY	H.	ZENSHIP		
٥	CITIZENSHIP	Pittsford	New York 14634 USA	USA			
1	BUSINESS	BUSINESS ADDRESS Eastman Kodak Company	343 State Street, Rochester	STATE & ZIP CODE New York 14			
_	FULL NAME OF	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NA			
2	INVENTOR	Hastreiter	Jacob	J.	75.101.10		
0	RESIDENCE & CITIZENSHIP	Spencerport	STATE OR FOREIGN COUNTRY New York 14559 USA	COUNTRY OF CITE			
2	BUSINESS ADDRESS	BUSINESS ADDRESS Eastman Kodak Company	343 State Street, Rochester	STATE & ZIP CODE New York 14			
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NA			
2	INVENTOR	Mindler	Robert	F.			
0	RESIDENCE & CITIZENSHIP	City Churchville	New York 14428 USA	COUNTRY OF CITE	ZENSHIP		
3	BUSINESS	BUSINESS ADDRESS Eastman Kodak Company	343 State Street, Rochester	STATE & ZIP CODE New York 14			
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NA			
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2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NA	AME		
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5	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE	(COUNTRY)		
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NA	AME		
0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITI	ZENSHIP		
6	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE	(COUNTRY)		
tru im ap	e; and further prisonment, or	r that these statements were made with a r both, under Section 1001 of Title 18 of t y patent issued thereon.	n knowledge are true and that all statements the knowledge that willful false statements he United States Code, and that such willful further STATES COME, and that such willful further states are such as the states of the s	and the like so made	are punishable by fine or opardize the validity of the		
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SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
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DATE)	DATE
11/4/2003	11/6/03
SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
DATE	DATE
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	DATE 11/4/2003 SIGNATURE OF INVENTOR 205